

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	S.H.	1399	4/18/09
O.I.P.E. CLASSIFIER	10		4/26
FORMALITY REVIEW	11-111	711-30	6-12-2010
RESPONSE FORMALITY REVIEW			

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## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral)... Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

Claim	Final	Original	Date
1	✓	✓	4/29/09
2	✓	✓	4/23/09
3	✓	✓	4/26/09
4	✓	✓	
5	✓	✓	
6	✓	✓	
7	✓	✓	
8	✓	✓	
9	✓	✓	
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If more than 150 claims or 10 actions  
staple additional sheet here

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